

### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

P	I. Name of Lobbyist(s)Jodi Grimbilas  II. Name of lobbyist's partnership, firm or corporation, if any:					
L E						
A S	Bianco Prof	essional Association	1			
E		artnership, firm or corporation				
P	III. Name of Client			Date 04/30/2014		
R					_	
I N	Political Contributions	ution that is reportable	a nurquant to DSA Chan	ton 664 maid on habalf of the		
T	For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:					
	, ,	energiosof and tooofing firm, indicate the following.				
					_	
	Full name of candidate:	Pierce	David			
	run name of candidate.	(Last Name)	(First Name)	(Middle Name/Initial)		
	Amount of contribution \$	100.00	Office Candidate i	s Seeking Senate		
	_					
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the					
	actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."					
	Full name of candidate:	Soucy	Donna			
		(Last Name)	(First Name)	(Middle Name/Initial)		
	Amount of contribution \$ _	100.00				
	104		1			
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known,					
	enter an estimated value and the word "estimate."					
				<del></del>		
	Full name of candidate:	Woodburn	Jeff (First Name)	(Middle News-W-id-IV		
		(Last Name)	(First Name)	(Middle Name/Initial)		
	Amount of contribution \$ _	100.00				

If the contribution is an in-kind contribution, provide a desactual cost of the in-kind contribution on the line above fo enter an estimated value and the word "estimate."	scription of the goods or services provided, and enter the r amount of contribution. If the actual cost is not known,		
(If more than three contributions were made, report additional contributions on separate addendum C forms.)			
Sworn Statement/Affirmation by Lobbyist			
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing informatio is true and complete to the best of my knowledge and belief.			
(Signature of lobbyist)	04/30/14 (Date)		
Jodi Grimbilas (Print Name of lobbyist)			

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I. Name of Lobbyist(s)Jo	di Grimbilas			
I. Name of lobbyist's partnership, firm or corporation, if any:				
	Bianco Professional Association			
	tnership, firm or corporation)			
(Name of par	theising, inition corporation)			
III. Name of Client			Date04/30/2014	
Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:				
Full name of candidate:	Lasky	Bette		
_	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$	50.00	Office Candidate is	s Seeking Senate	
Full name of candidate:	Prescott	Russell	0.C.1.H. N /////C1)	
actual cost of the in-kind co	ind contribution, provid	(First Name)  e a description of the good ove for amount of contribution	(Middle Name/Initial)  ds or services provided, and enter the ution. If the actual cost is not known	
Full name of candidate:	Watters (Last Name)	David (First Name)	(Middle Name/Initial)	
Amount of contribution \$	100.00			

If the contribution is an in-kind contribution, provide a description actual cost of the in-kind contribution on the line above for amount enter an estimated value and the word "estimate."	n of the goods or services provided, and enter the at of contribution. If the actual cost is not known,	
(If more than three contributions were made, report additional contribution	ns on separate addendum C forms.)	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.		
(Signature of lobbyist)  Jodi Grimbilas (Print Name of lobbyist)	04/30/14 (Date)	

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•	I. Name of Lobbyist(s) _	Jodi Grimbilas		
	II. Name of lobbyist's partnership, firm or corporation, if any:			
1		•		
5		partnership, firm or corporation		
	(Name of	partitership, fifth of corporation	)	
•	III. Name of Client			Date04/30/2014
2	D 1111 1 1 C 1 1 1 1			
.1	Political Contribution		e nursuant to RSA Chan	ter 664 paid on behalf of the
1	client/lobbyist and lobb			ter out paid on behalf of the
	cheminoody ist und 1000	y mg mm, marcate the	ono wing.	
	Full name of candidate:	Stiles	Nancy	
		(Last Name)	(First Name)	(Middle Name/Initial)
	Amount of contribution \$	100.00	Office Candidate i	s Seeking Senate
	actual cost of the in-kind enter an estimated value a	contribution on the line ab	pove for amount of contribu	ds or services provided, and enter the ution. If the actual cost is not known,
	Full name of candidate			
	Full name of candidate	(Last Name)	(First Name)	(Middle Name/Initial)
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not keenter an estimated value and the word "estimate."			ds or services provided, and enter the ution. If the actual cost is not known,
	Full name of candidate	:(Last Name)	(First Name)	(Middle Name/Initial)

If the contribution is an in-kind contribution, provide a des actual cost of the in-kind contribution on the line above for enter an estimated value and the word "estimate."	cription of the goods or services provided, and enter the ramount of contribution. If the actual cost is not known,
(If more than three contributions were made, report additional con-	ntributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and her is true and complete to the best of my knowledge and	
(Signature of lobbyist)  Jodi Grimbilas (Print Name of lobbyist)	

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#### STATE OF NEW HAMPSHIRE

#### 2014 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

**RECEIVED** 

MAY 05 2014

PLEASE PRINT

NEW HAMPSHIRE

I. Name of Lobbyist(s)	Jodi Grimbilas		DEPARTMENT OF S
II. Name of lobbyist's par	rtnership, firm or corporation, if	any:	
Bianco Profession	al Association		
	partnership, firm or corporation)		
10 Contro Stree		, KIII	00004
Business Address: (Street)	et Concord (Town/City)	I NH (State)	03301 (Zip Code)
608 225 7170		,	
( 603) <u>225-7170</u> (Telephone)	(603) <u>226-0165</u>		@biancopa.com
reportable expense trans	s: (Choose one – file separate repeations which are not attributable ons occurring in the months prior to	e to any one client).	
	all Name of Client as it appears on the L		
	ons by the lobbyist (including the loclient.	obbyist's family), or the lobbying	firm listed below which
_	pril 30, 2014 🕱	July 30, 2014	
	om date of registration to 3/31/14	activity from 4/1/14 to 6/30/14	
	ctober 29, 2014 $\Box$ ity from 7/1/14 to 9/30/14	January 28, 2015 ☐ <i>activity from 10/1/14 to 12/31</i> .	/14
	fees received and no reportable plete just this form and submit it to		-
	anouts are attached.		
VI. Check if additional re  If you have received fe	ees or made expenditures, you must	file Addendum A – Fees and Fr	vnenses
	norarium or reimbursed expenses, y		
If you, your firm, or yo	our family has made political contri	butions, you must file Addendu	m C-Political Contribution
Sworn Statement/Affirma I have read RSA 15, RSA to the best of my knowledg	15-B and RSA 664 and hereby swea	ar or affirm that the foregoing in 04/30/14	formation is true and com
Jan 1			
(Signature of lobbyist)		(Dat	e)
Jodi Grimbilas			
(Print Name of lobbyist)			